

**FTC vs Fortuna Alliance, L.L.C, et al.
REPLACEMENT CLAIM FORM**

This form is only for members who did not receive a refund claim form directly. This claim form must be postmarked no later than June 30, 1997.

NAME & ADDRESS WHEN JOINED
MEMBERSHIP

CHANGES SINCE ORIGINAL

I swear or affirm under penalty of perjury that:

1. My membership number(s) was/were _____.
2. The amount I actually paid to Fortuna Alliance, LLC, was \$ _____ for Elite memberships,
\$ _____ for Premier memberships, \$ _____ for Ambassador memberships.
3. The amount of all refunds and payments I received from Fortuna was \$ _____.
4. Please list the dates and amounts of payments you made to Fortuna below:

Please supply copies of the documents showing your payments. Do not send original documents.

6. I affirm that I have not sent in any other refund claim forms in this case.

Signed	Date

All claims are subject to a final review for accuracy. Send this form no later than June 30, 1997 to:

FTC v. Fortuna Alliance
Claims Administration Center
c/o Gilardi & Co. LLC
PO Box 8040
San Rafael, CA 94912-8040